

County: La Crosse
BETHANY-RIVERSIDE
2575 SOUTH 7TH STREET

Facility ID: 1760

Page 1

LA CROSSE 54601 Phone: (608) 796-8200

Operated from 1/1 To 12/31 Days of Operation: 366

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/00): 123

Total Licensed Bed Capacity (12/31/00): 123

Number of Residents on 12/31/00: 120

Ownership:

Highest Level License:

Operate in Conjunction with CBRF?

Title 18 (Medicare) Certified?

Average Daily Census:

Non-Profit Church Related

Skilled

No

Yes

120

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/00)				Length of Stay (12/31/00)		%	

Home Health Care	No	Primary Diagnosis		%	Age Groups		%	Less Than 1 Year	40.0
Supp. Home Care-Personal Care	No	-----			-----			1 - 4 Years	40.0
Supp. Home Care-Household Services	No	Developmental Disabilities	0.8		Under 65	4.2		More Than 4 Years	20.0
Day Services	No	Mental Illness (Org./Psy)	44.2		65 - 74	3.3		-----	
Respite Care	No	Mental Illness (Other)	5.0		75 - 84	31.7			100.0
Adult Day Care	Yes	Alcohol & Other Drug Abuse	0.0		85 - 94	47.5	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.8		95 & Over	13.3	Full-Time Equivalent		
Congregate Meals	No	Cancer	2.5			-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	2.5			100.0	(12/31/00)		
Other Meals	No	Cardiovascular	7.5		65 & Over	95.8	-----		
Transportation	No	Cerebrovascular	10.0		-----		RNs	15.3	
Referral Service	No	Diabetes	0.0		Sex	%	LPNs	7.4	
Other Services	Yes	Respiratory	0.8		-----		Nursing Assistants		
Provide Day Programming for		Other Medical Conditions	25.8		Male	22.5	Aides & Orderlies	40.1	
Mentally Ill	No		-----		Female	77.5			
Provide Day Programming for			100.0			-----			
Developmentally Disabled	No					100.0			

Method of Reimbursement

Level of Care	Medi care (Title 18)			Medi caid (Title 19)			Other			Private Pay			Managed Care			Percent Of All Residents	
	No.	%	Per Diem	No.	%	Per Diem	No.	%	Per Diem	No.	%	Per Diem	No.	%	Per Diem	No.	
			Rate			Rate			Rate			Rate			Rate		
Int. Skilled Care	0	0.0	\$0.00	1	1.4	\$121.00	0	0.0	\$0.00	0	0.0	\$0.00	1	50.0	\$450.00	2	1.7%
Skilled Care	3	100.0	\$229.00	63	91.3	\$103.00	0	0.0	\$0.00	44	95.7	\$149.00	1	50.0	\$345.00	111	92.5%
Intermediate	---	---	---	5	7.2	\$85.00	0	0.0	\$0.00	2	4.3	\$137.00	0	0.0	\$0.00	7	5.8%
Limited Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Personal Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Residential Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Dev. Disabled	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Traumatic Brain Inj.	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Ventilator-Dependent	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Total	3	100.0		69	100.0		0	0.0		46	100.0		2	100.0		120	100.0%

BETHANY-RIVERSIDE

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/00				
				% Needing	% Totally	Total
Percent Admissions from		Activities of	%	Assistance of	Dependent	Number of
Private Home/No Home Health	7.8	Daily Living (ADL)	Independent	One Or Two Staff		Residents
Private Home/With Home Health	6.2	Bathing	5.8	78.3	15.8	120
Other Nursing Homes	10.1	Dressing	5.8	78.3	15.8	120
Acute Care Hospitals	66.7	Transferring	5.8	78.3	15.8	120
Psych. Hosp. -MR/DD Facilities	0.0	Toilet Use	5.8	78.3	15.8	120
Rehabilitation Hospitals	0.0	Eating	5.8	78.3	15.8	120
Other Locations	9.3	*****				
Total Number of Admissions	129	Continence		%	Special Treatments	%
Percent Discharges To:		Indwelling Or External Catheter		1.7	Receiving Respiratory Care	2.5
Private Home/No Home Health	10.3	Occ/Freq. Incontinent of Bladder	50.0		Receiving Tracheostomy Care	0.0
Private Home/With Home Health	19.8	Occ/Freq. Incontinent of Bowel	25.0		Receiving Suctioning	0.0
Other Nursing Homes	6.3				Receiving Ostomy Care	2.5
Acute Care Hospitals	7.1	Mobility			Receiving Tube Feeding	0.8
Psych. Hosp. -MR/DD Facilities	0.0	Physically Restrained	4.2		Receiving Mechanically Altered Diets	13.3
Rehabilitation Hospitals	0.0					
Other Locations	8.7	Skin Care			Other Resident Characteristics	
Deaths	47.6	With Pressure Sores	1.7		Have Advance Directives	80.0
Total Number of Discharges		With Rashes	7.5		Medications	
(Including Deaths)	126				Receiving Psychoactive Drugs	55.0

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

	Ownership:			Bed Size:		Licensure:		All	
	This Facility			100- 199		Skilled		Facilities	
	%	Peer Group	Ratio	%	Ratio	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	97.6	87.8	1.11	83.6	1.17	84.1	1.16	84.5	1.15
Current Residents from In-County	92.5	82.6	1.12	86.1	1.07	83.5	1.11	77.5	1.19
Admissions from In-County, Still Residing	34.1	25.9	1.32	22.5	1.52	22.9	1.49	21.5	1.59
Admissions/Average Daily Census	107.5	116.8	0.92	144.6	0.74	134.3	0.80	124.3	0.87
Discharges/Average Daily Census	105.0	117.3	0.90	146.1	0.72	135.6	0.77	126.1	0.83
Discharges To Private Residence/Average Daily Census	31.7	43.9	0.72	56.1	0.56	53.6	0.59	49.9	0.64
Residents Receiving Skilled Care	94.2	91.3	1.03	91.5	1.03	90.1	1.05	83.3	1.13
Residents Aged 65 and Older	95.8	97.1	0.99	92.9	1.03	92.7	1.03	87.7	1.09
Title 19 (Medicaid) Funded Residents	57.5	56.2	1.02	63.9	0.90	63.5	0.90	69.0	0.83
Private Pay Funded Residents	38.3	37.5	1.02	24.5	1.57	27.0	1.42	22.6	1.70
Developmentally Disabled Residents	0.8	0.6	1.34	0.8	1.01	1.3	0.66	7.6	0.11
Mentally Ill Residents	49.2	36.3	1.35	36.0	1.37	37.3	1.32	33.3	1.47
General Medical Service Residents	25.8	21.1	1.23	21.1	1.23	19.2	1.34	18.4	1.40
Impaired ADL (Mean)	55.0	50.8	1.08	50.5	1.09	49.7	1.11	49.4	1.11
Psychological Problems	55.0	50.0	1.10	49.4	1.11	50.7	1.08	50.1	1.10
Nursing Care Required (Mean)	3.5	6.8	0.52	6.2	0.57	6.4	0.55	7.2	0.50